

TENNESSEE ACCESS TO RECOVERY (TN-ATR)
SERVICES AND RATES
SUMMARY

SCREENING	<i>Unit of Service</i> 1 screen	<i>Service Maximum</i> Not applicable	<i>Reimbursement</i> Non-reimbursable
<i>Assessments</i>			
CLINICAL ASSESSMENT	<i>Unit of Service</i> 1 assessment	<i>Service Maximum</i> 1 assessment	<i>Reimbursement</i> \$65.00/assessment
RECOVERY SUPPORT SERVICES ASSESSMENT	<i>Unit of Service</i> 1 assessment	<i>Service Maximum</i> 1 assessment	<i>Reimbursement</i> \$25.00/assessment
<i>CLINICAL SERVICES</i>			
INTENSIVE OUTPATIENT (IOP)	<i>Unit of Service</i> 1 day (minimum of 3 hours per day)	<i>Service Maximum</i> Up to 68 days Minimum of 17 weeks	<i>Reimbursement</i> \$55.00/day
CONTINUING CARE/AFTERCARE	<i>Unit of Service</i> Individual - 50 min. Group-90 min.	<i>Service Maximum</i> 15 sessions	<i>Reimbursement</i> Individual Group \$35/session \$20/person/group
<i>RECOVERY SERVICES</i>			
BASIC EDUCATION	<i>Unit of Service</i> Individual - 50 min. Group - 60 min.	<i>Service Maximum</i> 12 sessions (individual & group combined)	<i>Reimbursement</i> Individual Group \$30/session \$20/person/group
CASE MANAGEMENT	<i>Unit of Service</i> 15 minutes	<i>Service Maximum</i> 104 units (26 hours) 12 month maximum	<i>Reimbursement</i> \$10.00/15 minutes
DOMESTIC VIOLENCE SUPPORT	<i>Unit of Service</i> Individ-50 minutes Group-60 minutes	<i>Service Maximum</i> 12 sessions (individual & group combined)	<i>Reimbursement</i> Individual Group \$30/session \$20/person/group
DRUG TESTING	<i>Unit of Service</i> 1 screen	<i>Service Maximum</i> Recovery Support - 4 screens Treatment - 12	<i>Reimbursement</i> \$20.00 per screen
EMPLOYMENT SKILLS	<i>Unit of Service</i> Individual - 50 min. Group - 60 min.	<i>Service Maximum</i> 12 sessions (individual & group combined)	<i>Reimbursement</i> Individual Group \$30/session \$20/person/group
FAMILY SUPPORT	<i>Unit of Service</i> Individual - 50 min. Group - 60 min.	<i>Service Maximum</i> 12 sessions (individual & group combined)	<i>Reimbursement</i> Individual Group \$30/session \$20/person/group

NUTRITIONAL SUPPORT	<i>Unit of Service</i> Individual - 50 min. Group - 60 min.	<i>Service Maximum</i> 12 sessions (individual & group combined)	<i>Reimbursement</i> Individual Group \$30/session \$20/person/group
PASTORAL SUPPORT	<i>Unit of Service</i> Individual - 50 min. Group - 60 min.	<i>Service Maximum</i> 12 sessions (individual & group combined)	<i>Reimbursement</i> Individual Group \$30/session \$20/person/group
RECOVERY SOCIAL ACTIVITIES	<i>Unit of Service</i> 1 activity	<i>Service Maximum</i> 10 activities	<i>Reimbursement</i> \$15.00 / activity
RECOVERY SKILLS	<i>Unit of Service</i> Individual-50 min. Group-60 min.	<i>Service Maximum</i> 12 sessions (individual & group combined)	<i>Reimbursement</i> Individual Group \$30/session \$20/person/group
RELAPSE PREVENTION	<i>Unit of Service</i> Individual-50 min. Group-60 min.	<i>Service Maximum</i> 12 sessions (individual & group combined)	<i>Reimbursement</i> Individual Group \$30/session \$20/person/group
SPIRITUAL SUPPORT	<i>Unit of Service</i> Individual -50 min. Group - 60 min.	<i>Service Maximum</i> 12 sessions (individual & group combined)	<i>Reimbursement</i> Individual Group \$30/session \$20/person/group
TRANSITIONAL HOUSING	<i>Unit of Service</i> 1 day	<i>Service Maximum</i> recovery support - 30 days Treatment - 90 days	<i>Reimbursement</i> \$20.00 per day
TRANSPORTATION	<i>Unit of Service</i> 1 mile	<i>Service Maximum</i> 500 miles per voucher per individ.	<i>Reimbursement</i> State approved mileage rate

COLLATERAL SERVICES

BASIC NEEDS	<i>Unit of Service</i> 1	<i>Service Maximum</i> 150	<i>Reimbursement</i> \$150.00/voucher
BASIC UTILITIES	<i>Unit of Service</i> 1	<i>Service Maximum</i> 300	<i>Reimbursement</i> \$300.00/voucher
HOME ESTABLISHMENT	<i>Unit of Service</i> 1	<i>Service Maximum</i> 200	<i>Reimbursement</i> \$200.00/voucher
MEDICAL	<i>Unit of Service</i> 1	<i>Service Maximum</i> 300	<i>Reimbursement</i> \$300.00/voucher
MEDICATION	<i>Unit of Service</i> 1	<i>Service Maximum</i> 500	<i>Reimbursement</i> \$500.00/voucher
RENTAL ASSISTANCE	<i>Unit of Service</i> 1	<i>Service Maximum</i> 300	<i>Reimbursement</i> \$300.00/voucher

**TENNESSEE ACCESS TO RECOVERY (TN-ATR)
SERVICES
DEFINITIONS, REQUIREMENTS AND RATES**

SCREENING	Unit of Service 1 screen	Service Maximum Not applicable	Reimbursement Non-reimbursable
Brief Description: Screening to determine whether individuals meet basic consumer eligibility criteria for ATR services	Service Requirements: Use of Division's brief screening instrument		Staff Qualifications: Staff trained on TN-ATR eligibility criteria and use of instrument
ASSESSMENTS			
CLINICAL ASSESSMENT	Unit of Service 1 assessment	Service Maximum 1 assessment	Reimbursement \$65.00/assessment
Brief Description: A clinical assessment to determine appropriate TN-ATR treatment and/or recovery support services for eligible consumers	Service Requirements: 1. Must minimally include an ASI to determine problem severity.* 2. ASAM PPC-2R criteria must be used if the ASI indicates the need for clinical treatment. *If an ASI has been completed for the consumer's current episode of care, a new ASI does not have to be completed for enrollment in ATR services that are a continuation of that episode of care. The existing ASI may be requested, with a Release of Information signed by the consumer, from the provider completing the ASI, and it must be documented in the consumer's record. The consumer's episode of care is defined as continuous alcohol and drug services without a break over a period of time and which may include multiple providers.		Staff Qualifications: 1. Staff must be Qualified A&D Personnel as defined by DOH licensure (staff in licensed A&D treatment facilities are qualified based on facility license) and must have completed training by a qualified trainer in the use of ASI and ASAM 2. Staff in non-licensed A&D recovery support facilities must be pre-approved by the Division based on submitting an application

RECOVERY SUPPORT SERVICES ASSESSMENT	Unit of Service 1 assessment	Service Maximum 1 assessment	Reimbursement \$25.00/assessment
Brief Description: Consists of the intake GPRA and the ATR screening tool	Service Requirements: 1. Available to those consumers accessing ONLY recovery support services only		Staff Qualifications: May be offered by state licensed treatment providers and non-licensed recovery support providers
CLINICAL SERVICES			
INTENSIVE OUTPATIENT (IOP)	Unit of Service 1 day (minimum of 3 hours per day)	Service Maximum 68 days Minimum of 17 weeks	Reimbursement \$55.00 per day
Brief Description: ASAM level II.1 services which are highly structured and intensive. Services may include individual therapy, group therapy, family therapy or any combination of such counseling services.	Service Requirements: 1. Programs must be based on the Matrix Institute Model of Intensive Outpatient Stimulant Treatment 2. Program plans must be approved by the Division 3. Consumers must have a primary or secondary cocaine, crack and/or methamphetamine abuse or dependence diagnosis 4. Services must meet ASAM-PPC-2R patient placement criteria. 5. The program must provide between 9 and 19 hours per week of clinically intensive programming, and it must meet a minimum of 4 days per week for 17 weeks for a maximum of 68 ATR reimbursed services 6. Group size must be a minimum of 6 and no more than 12 clients for a valid group session unless otherwise approved by the Division		Staff Qualifications: 1. All direct service clinical staff delivering the IOP services must be trained in the Matrix Institute Model 2. May only be provided by state licensed treatment providers

CONTINUING CARE/AFTERCARE	<i>Unit of Service</i> Individual-50 min. Group-90 min.	<i>Service Maximum</i> 15 sessions (individual & group combined)	<i>Reimbursement</i> Individual \$35/session	Group \$20/person/group
Brief Description: Services delivered following the consumer's successful completion of any treatment program, including non-Access to Recovery treatment programs, to assure the consumer maintains progress in achieving their goals and in establishing a recovery oriented lifestyle.	Service Requirements: 1. Service must be based on a written individualized plan developed by the consumer and the treatment staff 2. Group size must be a minimum of 6 consumers and no more than 12 consumers		Staff Qualifications: 1. May only be provided by state licensed treatment providers 2. Staff must be trained and qualified according to the agency's governing body	
RECOVERY SUPPORT SERVICES				
BASIC EDUCATION	<i>Unit of Service</i> Individual - 50 min. Group - 60 min.	<i>Service Maximum</i> 12 sessions (individual & group combined)	<i>Reimbursement</i> Individual \$30/session	Group \$20/person/group
Brief Description: GED prep, tutoring, literacy classes, or other services designed to equip consumers with basic education skills	Service Requirements: 1. If group, group size must be a minimum of 2 consumers and no more than 20 consumers 2. Services may be offered during the treatment and/or recovery phase		Staff Requirement: 1. Staff must be trained and qualified according to the agency's governing body 2. May be offered by state licensed treatment providers and non-licensed recovery support providers	
CASE MANAGEMENT	<i>Unit of Service</i> 15 minutes	<i>Service Maximum</i> 104 units (26 hours) in a 12 month period	<i>Reimbursement</i> \$10.00/15 minutes	
Brief Description: Coordination of care services which assist a consumer in identifying, accessing, and coordinating resources that are supportive in achieving their treatment and recovery goals	Service Requirement: 1. Services may be provided during the treatment and/or recovery phase 2. Services may be delivered face-to-face or by telephone 3. Time spent in direct contact with the consumer, or with a collateral on behalf of the consumer, is		Staff Requirement: 1. Staff must be trained and qualified according to the agency's governing body 2. May be offered by state licensed treatment providers and non-licensed recovery support providers	

Voucher issued on the consumer's behalf to give family members and significant others skills to support a consumer's recovery Consumers must be enrolled in ATR.	5. If group, group size must be a minimum of 2 consumers and no more than 20 consumers 6. Services may be offered during the treatment and/or recovery phase		5. Staff must be trained and qualified according to the agency's governing body 6. May be offered by state licensed treatment providers and non-licensed recovery support providers
NUTRITIONAL SUPPORT	Unit of Service Individual - 50 min. Group - 60 min.	Service Maximum 12 sessions (individual & group combined)	Reimbursement Individual

higher power, identifying a sense of purpose and mission in one's life, achieving serenity and peace of mind, balancing one's body, mind, and spirit, utilizing spiritual practices such as prayer, meditation, and yoga, etc. These groups are based on universal spiritual principles and practices and are not based on specific religious convictions and beliefs.			
TRANSITIONAL HOUSING	<i>Unit of Service</i> 1 day	<i>Service Maximum</i> Recovery - 30 days Treatment - 90 days	<i>Reimbursement</i> \$20.00/day
Brief Description: Housing that is required on a transitional basis to support the consumer during their treatment and/or recovery phase	Service Requirement: <ol style="list-style-type: none"> 1. Must be community based, safe, and drug free 2. Must be governed or staffed to assure a safe and drug free environment 3. Must meet all local housing coded and have adequate liability insurance 4. Services may be provided during the treatment and/or recovery phase 		Staff Qualifications: <ol style="list-style-type: none"> 3. Staff must be trained and qualified according to the agency's governing body 4. May be offered by state licensed treatment providers and non-licensed recovery support providers
TRANSPORTATION	<i>Unit of Service</i> 1 mile	<i>Service Maximum</i> 500 miles per voucher per individual	TRANSPORTATION
Brief Description: Transporting of consumers for the purpose of accessing treatment and/or recovery services or any other activity that supports a consumers recovery, i.e., it is not offered as a stand alone service	Service Requirement: <ol style="list-style-type: none"> 1. Vehicle must be owned or leased by your agency 2. Must have proper vehicle insurance coverage 3. Reimbursable based on the following 3 criteria: <ol style="list-style-type: none"> (a) there is no other payment source for this service, and (b) the consumer has no other reliable transportation alternative, and (c) there is no public transportation or its use would create a hardship on the consumer 4. Staff may use their personal vehicles if the 		Staff Qualifications: <ol style="list-style-type: none"> 1. Vehicle drivers must have the appropriate chauffeur's or commercial driver license

	following conditions are met a) must have a class F license b) staff must have copy of current full coverage automobile insurance on file at agency	
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COLLATERAL SERVICES

BASIC NEEDS	<i>Unit of Service</i> 1	<i>Service Maximum</i> 150	<i>Reimbursement</i> \$150.00/voucher
Brief Description: To provide groceries, toiletries, and clothing needed for successful community living Consumer must be receiving or have received ATR clinical or recovery services	Service Requirements: 1. Case manager or agency staff member must oversee distribution of funds 2. Provider must maintain documentation of all funds spent on consumer's e half(cancelled checks, credit card receipts) 3. Cash funds are not to be distributed to client		Staff Qualifications: 5. Staff must be trained and qualified according to the agency's governing body 6. May be offered by state licensed treatment providers and non-licensed recovery support providers
BASIC UTILITIES	<i>Unit of Service</i> 1	<i>Service Maximum</i> 300	<i>Reimbursement</i> \$300/voucher
Brief Description: Funding for water/sewage, electricity, gas, and telephone to obtain/maintain permanent housing Consumer must be receiving or have received ATR clinical or recovery services	Service Requirements: 1. Case manager or agency staff member must oversee distribution of funds 2. Provider must maintain documentation of all funds spent on consumer's e half(cancelled checks, credit card receipts) 3. Cash funds are not to be distributed to client		Staff Qualifications: 7. Staff must be trained and qualified according to the agency's governing body 8. May be offered by state licensed treatment providers and non-licensed recovery support providers
HOME ESTABLISHMENT	<i>Unit of Service</i> 1	<i>Service Maximum</i> 200	
Brief Description: Funding for basic household needs such as; furniture, linens, kitchen supplies, etc., upon entrance to	Service Requirements: 1. Case manager or agency staff member must oversee distribution of funds 2. Provider must maintain documentation		Staff Qualifications: 9. Staff must be trained and qualified according to the agency's governing body 10. May be offered by state licensed treatment providers

<p>permanent housing</p> <p>Consumer must be receiving or have received ATR clinical or recovery services</p>	<p>of all funds spent on consumer's e half(cancelled checks, credit card receipts)</p> <p>3. Cash funds are not to be distributed to client</p>		<p>and non-licensed recovery support providers</p>
MEDICAL	Unit of Service 1	Service Maximum 300	Reimbursement \$300.00/voucher
<p>Brief Description: Funding assistance for medical needs such as; dental visits, co-payments, eye exams and/or eye glasses, etc.</p> <p>Consumer must be receiving or have received ATR clinical or recovery services</p>	<p>Service Requirements:</p> <p>1. Case manager or agency staff member must oversee distribution of funds</p> <p>2. Provider must maintain documentation of all funds spent on consumer's e half(cancelled checks, credit card receipts)</p> <p>3. Cash funds are not to be distributed to client</p>		<p>Staff Qualifications:</p> <p>11. Staff must be trained and qualified according to the agency's governing body</p> <p>12. May be offered by state licensed treatment providers and non-licensed recovery support providers</p>
MEDICATION	Unit of Service 1	Service Maximum 500	Reimbursement \$500.00/voucher
<p>Brief Description: Funding to obtain/maintain consumer's current prescription medications as dispensed by a pharmacy</p> <p>Consumer must be receiving or have received ATR clinical or recovery services</p>	<p>Service Requirements:</p> <p>1. Case manager or agency staff member must oversee distribution of funds</p> <p>2. Provider must maintain documentation of all funds spent on consumer's e half(cancelled checks, credit card receipts)</p> <p>3. Cash funds are not to be distributed to client</p>		<p>Staff Qualifications:</p> <p>13. Staff must be trained and qualified according to the agency's governing body</p> <p>14. May be offered by state licensed treatment providers and non-licensed recovery support providers</p>
RENTAL ASSISTANCE	Unit of Service 1	Service Maximum 300	Reimbursement \$300.00/voucher
<p>Brief Description: Funding to secure / maintain safe /permanent housing. Payable directly to a landlord or mortgage company</p> <p>Consumer must be receiving or have received ATR clinical or recovery services</p>	<p>Service Requirements:</p> <p>1. Case manager or agency staff member must oversee distribution of funds</p> <p>2. Provider must maintain documentation of all funds spent on consumer's e half(cancelled checks, credit card receipts)</p> <p>3. Cash funds are not to be distributed to client</p>		<p>Staff Qualifications:</p> <p>15. Staff must be trained and qualified according to the agency's governing body</p> <p>16. May be offered by state licensed treatment providers and non-licensed recovery support providers</p>